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## BIB DATA SHEET

CONFIRMATION NO. 3520

<b>SERIAL NUMBER</b> 10/783,092	<b>FILING or 371(c) DATE</b> 02/23/2004 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 03426.000140.		
<b>APPLICANTS</b> Taru Blom, Nousiainen, FINLAND; Lauri Kangas, Lieto, FINLAND; Risto Lammintausta, Turku, FINLAND;						
<b>** CONTINUING DATA *****</b> none						
<b>** FOREIGN APPLICATIONS *****</b> none						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 05/13/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SHIRLEY V GEMBEH/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 UNITED STATES						
<b>TITLE</b> METHOD FOR TREATMENT OF INDIVIDUALS WITH HIGH BONE TURNOVER						
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		